

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Sanofi US Services Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anne R Oller

Mailing Address 55 Corporate Drive

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sanofi US Services Inc.

Occupation

Director Client Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

218.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1407202

Amount of Each Receipt this Period

16.78

Full Name (Last, First, Middle Initial)

B. Teresa Pedone

Mailing Address 55 Corporate Drive

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sanofi US Services Inc.

Occupation

Dir Adherence & Self Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	19	/	2015

Transaction ID : A2015-1341928

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Jason M Pelletier

Mailing Address 55 Corporate Drive

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sanofi US Services Inc.

Occupation

Diabetes Area Business Leader DEAC0990

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	06	/	2015

Transaction ID : A2015-562288

Amount of Each Receipt this Period

65.00

SUBTOTAL of Receipts This Page (optional)..... ►

331.78

TOTAL This Period (last page this line number only)..... ►